

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/599810

FILING DATE

14 AUG 2008

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/		/	
2		/		/		/
3		/		/		/
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43					/	
44					/	
45					/	
46					/	
47					/	
48					/	
49					/	
50					/	
TOTAL IND.	<i>1</i>	↓		↓	<i>2</i>	↓
TOTAL DEP.	<i>28</i>	←		←	<i>25</i>	←
TOTAL CLAIMS	<i>29</i>				<i>27</i>	

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						